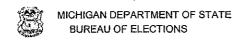


CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

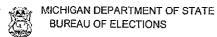
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement	covers From: 08/26/08 to 10/19/08
1. Committee I.D. Number	4. Candidate La	st Name First Name M.1.
150254	ELDER	BRIAN K
	4a. Office Sought	Including District # or Community Served (If applicable)
2. Committee Name	7TH DISTR	ICT COUNTY COMMISSIONER
FRIENDS OF BRIAN ELDER	4b. County of Res	idence BAY
5. Committee's Mailing Address		me & Residential Address
915 5TH ST	SALLY J GI	
BAY CITY MI 48708	5009 FRAS	
	BAY CITY N	/11 48706
Area Code and Phone (989) 895-6151	ĺ	
If the address in this box is different from the committee		
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	Area Code & Pho	ne (989) 667-0423
7. Treasurer's Business Address	8. Designated Reco	cord keeper's Name and Mailing Address (If the committee has a ord keeper)
2483 MIDLAND RD		
BAY CITY MI 48706		
(000) 004 7000		سست دن
Area Code and Phone (989) 684-7203	Area Code and P	hone
9. TYPE OF STATEMENT		
9a. Pre-Election OR 9b. Post	t-Election	9c. Annual Statement (Coverage Year
		9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c
Pre-Election or Post-Election Statement relates to:		or 9e to indicate which Statement is being amended)
	_	9e. Dissolution of Candidate Committee
Primary Ger	neral	Em C - Date of Discalation
Convention	iool	Effective Date of Dissolution
Special	cus	By checking this item, I\We certify that the committee has no assets or
Date of Election, Convention or Caucus		outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for
11/04/08		the Reporting Waiver.
		Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.
A committee that does not have a Reporting Waiver must file all re	equired Campaign S	statements. The Campaign Statements must include all applicable anding debts count against the \$1,000 Reporting Waiver threshold.
If any of the information listed in items 2, 4, 5, 6, 7, or 8 has caped	led since the inform	ation was shown on the committee's Statement of Organization, an ement. If a request for a Reporting Waiver is not received on or ement cannot be waived.
10. Verification: I/We certify that all reasonable diligence was used my/our knowledge and belief the contents are true, accurate and co	in the preparation on the properties of the complete.	of this statement and attached schedules (if any) and to the best of
Current Treasurer or	$\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}}}}$	2/11/20100
Designated Record keeper Sally J. Gray Type or Print Name	1 Sally	J Gran Date 10/20/08
	Signature	
Candidate Brian K. Elder	17/5	10/20/08
Type or Print Name	Signature	Date



1. Committee I.D. Number 150254

SUMMARY PAGE **CANDIDATE COMMITTEE**

CANDIDATE COMMITTEE	6-1	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>300.00</u>	
b. Uniternized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	_
c. Subtotal of "Contributions"	(3c.) \$ \$300.00	(18.) \$ \$15,625.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$300.00	(20.) \$ \$15,625.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$1,510.56	-
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	_
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$1,510.56	(23.) \$ \$10,558.55
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(106.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$4,950.00	_
b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00	_
	BALANCE STATEMENT	
 Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 	(13.) \$ \$6,227.01	
14. Amount received during reporting period	(14.) + \$ \$300.00	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$_\$6,527.01	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.) - \$ \$1,510.56	 .
(Add lines 9 and 11) 17. ENDING BALANCE	PC 040 45	*
(Subtract line 16 from line 15)	(17.) \$ \$5,016.45	

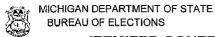


ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 150254

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/08/08 Name & Address;		
BRIAN ELDER 915 5TH ST BAY CITY MI 48708	_{\$} 50.00	_{\$} 4800.00
5. If over \$100.00 cumulative, please provide:		
Occupation ATTORNEY Employer SELF	Click Here f	or Memo Itemization
Business Address 301 MIDLAND RD, AUBURN MI 48611		
Type of Contribution: ✓ Direct ✓ Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/19/08 Name & Address		
BRIAN ELDER 915 5TH ST BAY CITY MI 48708	_{\$} _50.00	_{\$} 4850.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation ATTORNEY Employer SELF		
Business Address 301 MIDLAND RD, AUBURN MI 48611		
Type of Contribution: ✓ Direct ✓ Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/03/08 Name & Address:	-	
BRIAN ELDER 915 5TH ST BAY CITY MI 48708	_{\$} 50.00	_{\$} 4900.00
5. if over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation ATTORNEY Employer SELF		
Business Address 301 MIDLAND RD, AUBURN MI 48611		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/17/08 Name & Address		
BRIAN ELDER 915 5TH ST BAY CITY MI 48708	_{\$} 50.00	_{\$_} 4950.00
5. If over \$100.00 cumulative, please provide:	Olista I I a va Sau	
Occupation ATTORNEY Employer SELF	Click Here for	Memo Itemization
Business Address 301 MIDLAND RD, AUBURN MI 48611		
Type of Contribution: V Direct V Loan from a person Fund Raiser		
Page Subtotal	\$200.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Enter this total on line 3a of Summary	
49°	Page.	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

middle initial. Check bo Committee (PAC) Repo	x to indicate if cont rt <u>all</u> contributions	ribution is from a Political Co regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: Bay County SIS CEN Bay City 5. If over \$100.00 cum	PAC Receipt? Clark Ler Ave. MI 48 ulative, please pro	708	Receipt 09/19/08	_{\$} 100.00	\$
Occupation				Click Here fo	r Memo Itemization
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser	Refund 1A-1)	
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of R	_		
				\$	\$
5. If over \$100.00 cum	ılative, please pro	vide:		Click Here for	r Memo Itemization
Occupation		Employer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Name & Address:		YES 4. Date of F		\$Click Here for	\$ Memo Itemization
5. If over \$100.00 cumu	ılative, please pro			0,,0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Occupation		Employer	Marine I de la Company de la C		
Business Address Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date of	Receipt	_	
				\$	\$
5. If over \$100.00 cum	ılative, please pro	vide:		Cliab Hara for	Memo Itemization
Occupation		Employer		- Click riefe for	метто пенидацоп
Business Address			The fill of the desired to the control of the contr		
Type of Contribution:	Direct	Loan from a person	Fund Raiser		,
			Page Subto	tal \$100.00	
		.~	Grand Total of All Schedules 1		
ງ ງ		(C	complete on last page of Schedu	Enter this total on line 3a of Summary	J
Page of				Page.	



____1 ___2 Page _____ of ___

ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

150254 1. Committee I. D. Number

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name			\$
Address	Purpose:	Date	Ψ
		Llara for Massa	Maniantina Tama
	<u> </u>	here for ivierno	Itemization Type
Grand Date:	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser Expenditure #2	statement	·	
Name BARE BONES BAR-B-Q	Democratic Party Volunteers	09/05/08	\$ 96.00
Address	Purpose: LUNCH MEETING	Date	
807 COLUMBUS			
BAY CITY MI 48708		Here for Iviemo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name COMMITTEE TO ELECT DON JACOBS		09/10/08	\$ 20.00
Address	Purpose: TICKET	Date	
4660 WILLOW DR		lara for Marra I	tamination Tuna
BAY CITY MI 48706	r	iere ioi Memo i	temization Type
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name RIVET FOR DRAIN COMMISSIONER		09/18/08	
Address	Purpose: TICKET	Date	\$ 20.00
4542 MOCASA COURT	Purpose:		
BAY CITY MI 48708	Click H	lere for Memo I	temization Type
	Check box if this expenditure is payment of		
✓ Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name BAY COUNTY RIGHT TO LIFE		00/25/09	
Address	Purpose: TICKET	09/25/08 Date	\$ 70.00
314 JACKSON	Purpose:	Duito	 -
BAY CITY MI 48708		lere for Memo !	temization Type
√ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	\$206.00
	Grand Total of all S (Complete on last page		
		-	Enter this total on line 8a of



ITEMIZED EXPENDITURES **SCHEDULE 1B CANDIDATE COMMITTEE**

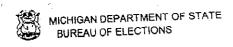
1. Committee I. D. Number

150254

2. Committee Name FRIENDS OF BRIAN ELDER

Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Con and thought		3, 34,3	o, runount
Expenditure #1			
Name WESTERN AMERICAN MAILERS		09/30/08	\$ 824.64
Address	Purpose: MAILING	Date	<u> </u>
5510 33RD ST SE	Tarposo.		
GRAND RAPIDS MI 49512	Click	Here for Memo	Itemization Type
0.0 4.15 70 4.150 101 400 12	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #2	statement	-	
Name DT DDIATING			
Name RT PRINTING		09/30/08	\$ 224.00
Address	Purpose: PRINTING	Date	¥ <u>22</u> +.00
	Pulpose:		
4778 W MAIN	Click	Here for Memo	Itemization Type
MILLINGTON MI 48746			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
	statement		
Expenditure #3			
Name MI HOUSE DEMOCRATIC FUND		40440100	
		10/13/08	\$ 100.00
Address	Purpose: FUNDRAISER	Date	
PO BOX 16193			
LANSING MI 48901	 	lere for Memo	Itemization Type
	Check box if this expenditure is payment of		
✓ Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name RIGHT TO LIFE OF MICHIGAN			
MONT TO LITE OF WICHIGAN		09/30/08	\$ 55.92
Address	Purpose: MAILING	Date	¥ 55.52
PO BOX 901	1 dipose.		
GRAND RAPIDS MI 49509	Click H	lere for Memo	temization Type
914 415 14 4 150 WE 45005	Check box if this expenditure is payment of		• • • • • • • • • • • • • • • • • • • •
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #5			
Name BAY COUNTY DEMOCRATIC PARTY		09/25/08	
Address	TICKET		\$ 100.00
	Purpose: TICKET	Date	
226 LIBBY	Click H	ere for Memo I	temization Type
PINCONNING MI 48650	Check box if this expenditure is payment of		ionization Typo
✓ Fund Raiser	debt or obligation reported on previous		
	statement		
	Subtot	al this page	\$1,304.56
	Grand Total of all S	chedules 18	
	(Complete on last page		1510.56
		_	Enter this total

on line 8a of -Summary-Page



DERTS AND OBLIGATIONS

1. Committee I.D. Number

150254

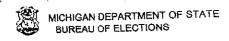
•	····-	
	SCHED	ULE 1E

FRIENDS OF BRIAN ELDER

CANDIDATE COMMITTEE	ommittee Name			
This Schedule itemizes:		and obligations owed to c	or forgiven by the com	mittee.
a Debts and obligations owed by or forgiven the comm	nittee OR b. Debts ck either a or b. Use only for the pur	and obligations owed <u>to</u> c rpose checked.)	i lorgiven <u>by</u> the com	
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
guarantors, if any. Debt #1 Corp? Yes Owed to or by:	4. Type: LOAN	\$\$		
BRIAN ELDER	5. Date Debt Was Incurred;	\$		
915 5TH ST	01/11/08	\$	•	\$ 50.00
BAY CITY MI 48708	6. Original Amount of Debt.	<u> </u>	. •	C GODONEN
	\$ 50.00	\$	į	FORGIVEN
			nount Endorsed: \$ _	
If bank loan, name of endorser or guarantor:				
Debt #2 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER	5. Date Debt Was Incurred: 01/25/2008	5		
915 5TH ST	6. Original Amount of Debt:	\$\$	\$	\$_50.00
BAY CITY MI 48708	\$ 50.00	\$		FORGIVEN
		\$		
			Amount Endorsed: \$_	
if bank loan, name of endorser or guarantor:	LOAN		ļ	
Debt #3 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER	5. Date Debt Was Incurred:	\$	-	
915 5TH ST	02/11/2008	\$		\$ 50.00
BAY CITY MI 48708	6. Original Amount of Debt:	\$\$	· • ————	FORGIVEN
	<u>\$ 50.00</u>	\$	_	PORGIATIO
			Amount Endorsed: \$	
If bank loan, name of endorser or guarantor:				\$150.00
		Page Subto	tal (Outstanding debt)	\$150.00
Grand Total of all Schedules 1E				
Grand Total of all Schedules 16 (Complete on last page of Schedule showing amounts owed by or to the committee)				Enter this total on line 12a "owed

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

by"" or line 12b "owed to" of the Summary Page



DEBTS AND OBLIGATIONS 1.00	mmittee I.D. Number 1502	254				
SCHEDULE 1E	2. Committee Name FRIENDS OF BRIAN ELDER					
This Schedule itemizes:	nittee O R b. Debts k either a or b. Use only for the pu					
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	Outstanding Balance at clos of this period (Item 6 minus Item 8)		
Debt #1 Corp? Yes Owed to or by:	4. Type: LOAN	\$				
BRIAN ELDER 915 5TH ST BAY CITY MI 48708	5. <u>Date Debt Was Incurred</u> : 02/22/08 6. Original Amount of Debt:	\$ \$	\$	\$ _50.00		

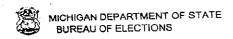
Debt #1 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER	5. Date Debt Was Incurred:	<u> </u>		
915 5TH ST	02/22/08	\$		s 50.00
BAY CITY MI 48708	6. Original Amount of Debt:	\$	\$	4
	s 50.00			FORGIVEN
	Ψ	<u> </u>		
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER	5. Date Debt Was Incurred:	\$		
915 5TH ST	03/17/2008	\$		s 50.00
BAY CITY MI 48708	6. Original Amount of Debt:	\$, \$	
	\$ 50.00	~		FORGIVEN
		<u> </u>		
if bank loan, name of endorser or guarantor:		An	ount Endorsed: \$_	1
Debt #3 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER	5. Date Debt Was Incurred:	\$		
915 5TH ST	03/20/2008	\$		s 50.00
BAY CITY MI 48708	6. Original Amount of Debt:	\$	1 \$	· · ·
:	_{\$_50.00}			FORGIVEN
·		\$		
If bank loan, name of endorser or guarantor:		Аг	nount Endorsed: \$_	
1) Deliving Hamilton				\$150.00

Page Subtotal (Outstanding debt)

Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a *owed by"" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



DEBTS AND OBLIGATIONS COUEDINE 15

1. Committee I.D. Number

150254

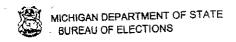
SCHEDOFE IE		FRIENDS OF BRIAN ELDE
ANDIDATE COMMITTEE	2. Committee Name	11(12)(30 0) 21

CANDIDATE COMMITTEE				······································
This Schedule itemizes:		-		
a Debts and obligations owed by or forgiven the com-	mittee OR b. Debts	s and obligations owed <u>to</u> or	forgiven by the corr	mittee.
	ck either a or b. Use only for the pu		0.000	2011-1
Name and Mailing Address of person, vendor or financial institution to whom debt is owed.	4. Type of Obligation (Description) 5. Indicate date debt was	7. Date and amount of each payment	Cumulative payment to date on debt	Outstanding Balance at close of this period (Item 6 minus)
Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	incurred 6. Indicate original amount of debt			item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER	5. Date Deht Was Incurred:	\$		
915 5TH ST	04/04/08	\$		s 50.00
BAY CITY MI 48708	6. Original Amount of Debt	S	\$	\$_00.00
	s 50.00			FORGIVEN
	Ψ	\$	1	,
If bank loan, name of endorser or guarantor:	40, 50	Amo	unt Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER	5. Date Debt Was Incurred;	<u> </u>		
915 5TH ST	04/18/2008	\$		s 50.00
BAY CITY MI 48708	6. Original Amount of Debt:	\$	\$	\$ 50.00
	\$_50.00			FORGIVEN
		\$		
if bank loan, name of endorser or guarantor:		Ап	ount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER	5. Date Debt Was Incurred:	\$!
915 5TH ST	05/02/2008	\$		s 50.00
BAY CITY MI 48708	6. Original Amount of Debt:	\$	\$	\$_50.00
	s 50.00			FORGIVEN
·		\$		
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	
If bank loan, name or endorser or guardines.				\$150.00
		Page Subtotal	(Outstanding debt)	Ψ130.00
		Grand Total	of all Schedules 1E	
(C	omplete on last page of Schedule s	showing amounts owed by o	r to the committee) [Enter this total
	ste if there was an outstanding a	mount owed on it at the cl	osing date of	on line 12a "owed by"" or line 12b "owed to" of the

Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Page 3 of 7

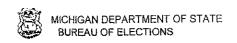


2. Committee Name FRIENDS OF BRIAN ELDER

CANDIDATE COMMITTEE				
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com	nmittee OR b. Debts ock either a or b. Use only for the pu	s and obligations owed <u>to</u> or	r forgiven <u>by</u> the con	nmittee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
guarantors, if any.				
Debt #1 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER	5. Date Debt Was Incurred:	\$		
915 5TH ST	05/16/08	\$		s 50.00
BAY CITY MI 48708	6. Original Amount of Debt:	\$	\$	
	s 50.00			FORGIVEN
	* · · · · · · · · · · · · · · · · · · ·	\$	=	
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER	5. Date Debt Was Incurred:	\$		
915 5TH ST	06/13/2008	\$		s 50.00
BAY CITY MI 48708	6. Original Amount of Debt:	\$	\$	3 00:00
	\$ <u>50.00</u>	<u>\$</u>		FORGIVEN
	*	\$		
If bank loan, name of endorser or guarantor:		Ar	nount Endorsed: \$_	*
Debt #3 Corp? Yes	4. Type: LOAN	\$		
Owed to or by:				
BRIAN ELDER	5. Date Debt Was Incurred:	<u> </u>		
915 5TH ST	06/27/2008	\$		s 50.00
BAY CITY MI 48708	6. Original Amount of Debt:	\$	\$	
	\$ <u>50.00</u>	\$		FORGIVEN
			s er i da a a de C	
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
		Page Subtota	(Outstanding debt)	\$150.00
	Grand Total of all Schedules 1E			
(Complete on last page of Schedule showing amounts owed by or to the committee)			Enter this total	
		mount owed on it at the C	losing date of	on line 12a "ower by" or line 12b "owed to" of the

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Summary Page



1. Committee I.D. Number

150254

Page <u>5</u> of 7

2. Committee Name FRIENDS OF BRIAN ELDER

CANDIDATE COMMITTEE 2.0	Continue Name			
This Schedule itemizes:	,			
a $\boxed{m V}$ Debts and obligations owed by or forgiven the con (Che	nmittee OR b. Debts	s and obligations owed <u>to</u> c irpose checked.)	or forgiven <u>by</u> the cor	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an	4. Type of Obligation (Description) 5. Indicate date debt was incurred	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus
incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	Indicate original amount of debt			Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: LOAN	\$\$		
BRIAN ELDER	5. Date Debt Was Incurred:	<u> </u>		
915 5TH ST BAY CITY MI 48708	07/11/08	\$		\$ 50.00
DAT OTT ME 40700	6. Original Amount of Debt:	\$	3	
	\$ 50.00	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER	5. Date Debt Was Incurred:	\$		
915 5TH ST BAY CITY MI 48708	12/30/2007 6. Original Amount of Debt:	\$	_	3950.00
BAT CITT WII 40700	e 3950.00	\$	\$	· •
	\$	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Ar	mount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER	5. <u>Date Debt Was Incurred</u> :	<u> </u>		
915 5TH ST	07/30/2008	\$		s 50.00
BAY CITY MI 48708	6. Original Amount of Debt:	\$	I \$	· · · · · · · · · · · · · · · · · · ·
	\$_50.00	<u> </u>		FORGIVEN
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
Page Subtotal (Outstanding debt)			\$4,050.00	
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				
				Enter this total on line 12a "owed

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

by"" or line 12b "owed to" of the Summary Page



1. Committee I.D. Number

150524

CANDIDATE	COMMITTEE

FRIENDS OF BRIAN FLIDER

CANDIDATE COMMITTEE 2.	Committee Name	OI DIVINITEED	LIX	
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the co	mmittee OR b. Debreck either a or b. Use only for the pr	s and obligations owed <u>to</u> curpose checked.)	or forgiven by the co	mmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER 915 5TH ST	5. Date Debt Was Incurred:	<u> </u>		
BAY CITY MI 48708	08/11/08	\$		50.00
	6. Original Amount of Debt	\$	\$	\$_50.00
	\$_50.00	<u> </u>		FORGIVEN
If bank loan, name of endorser or guarantor:			ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER	5. Date Debt Was Incurred:	\$		
915 5TH ST BAY CITY MI 48708	08/28/2008	\$		
D/(1 O) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6. Original Amount of Debt:	\$	l _{\$}	\$ 50.00
	\$_50.00	\$		FORGIVEN
If bank loan, name of endorser or guarantor:			ount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: LOAN		iodni chdorsed, #	
BRIAN ELDER	5. Date Debt Was Incurred:	\$		
915 5TH ST	09/08/2008	<u> </u>		
BAY CITY MI 48708	6. Original Amount of Debt:	\$	s	_{\$} 50.00
	\$ 50.00	\$	' Φ '	FORGIVEN
	· · · · · · · · · · · · · · · · · · ·	<u> </u>		LFORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$	
•		Page Subtotal	(Outstanding debt)	\$150.00
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				
Enter this total				

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

on line 12a "owed by"" or line 12b "owed to" of the Summary Page



1. Committee I.D. Number

CANDIDATE COMMITTEE 2. Committee Name FRIENDS OF BRIAN ELDER				
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the cor (Che	nmittee OR b. Debt eck either a or b. Use only for the pu	s and obligations owed <u>to</u> c irpose checked.)	or forgiven <u>by</u> the cor	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER 915 5TH ST	5. <u>Date Debt Was Incurred</u> : 09/19/08	\$		
BAY CITY MI 48708	6. Original Amount of Debt	\$\$] S	_{\$} _50.00
	s 50.00	\$		
	\$	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: LOAN	\$		
BRIAN ELDER	5. Date Debt Was Incurred:	s		
915 5TH ST	10/03/2008	· ·		
BAY CITY MI 48708	6. Original Amount of Debt:		\$	\$ 50.00
	\$_50.00	\$		FORGIVEN
		\$		
If bank loan, name of endorser or guarantor:		Ar	mount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: LOAN	<u> </u>		
BRIAN ELDER	5. <u>Date Debt Was Incurred</u> :	\$	THE STATE OF THE S	
915 5TH ST	10/17/2008	\$		
BAY CITY MI 48708	6. Original Amount of Debt:	\$	_{\$}	\$ 50.00
	{\$} 50.00	φ		FORGIVEN
		\$		
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$150.00
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				4,950.00
A daht ar ahligatian must be shown on this School	ula if there was an outstanding on	mount awad on it at the	loging data of	Enter this total on line 12a "owed by"" or line 12b

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it this Campaign Statement or it was forgiven during the period covered by this Campaign Statement. bligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of "owed to" of the Summary Page

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